

US EPA ARCHIVE DOCUMENT

MARCH 2011

FORM 1 and FORM C
KPDES INDIVIDUAL PERMIT COVERAGE APPLICATION

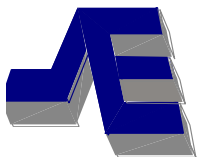
Sidney Coal Company, Inc.
KDMRE Permit No. 898-0835 (Sand Lick of Big Creek)

Prepared for:

Sidney Coal Company, Inc.
P.O. Box 299
Sidney, KY 41564

Prepared by:

Summit Engineering, Inc.
131 Summit Drive
Pikeville, KY 41501
Telephone: (606) 432-1447



SUMMIT ENGINEERING, INC.

March 11, 2011

Lynne Brosius
KPDES Branch
Division of Water
200 Fair Oaks Lane
Frankfort, Kentucky 40601

RE: Sidney Coal Company, Inc.
DMRE Permit No. 898-0835 (Sandlick of Big Creek)

Ms Brosius:

On May 24, 2010 an Individual KPDES application was submitted to the KY Division of Water for review. This application was a combined application which included the above referenced permit and Sidney Coal Company Permit No. 898-0813. Since submittal of this application Sidney Coal Company has made revisions to their DNR application. Due to changes in the DNR permit a revised application is being submitted for each project separately.

Enclosed please find a revised KPDES application including a completed Form 1 and C submitted for the above-referenced project to be located in Pike County. Sidney Coal Company, Inc. seeks approval for KPDES Individual Permit coverage for its proposed mining activities.

In addition, a variance is requested for the sampling of the following parameters found on Form C, Part V.A:

- Biological Oxygen Demand (BOD)
- Chemical Oxygen Demand (COD)
- Total Organic Carbon (TOC)
- Ammonia

These parameters are not usually affected by surface mining activity; therefore, sampling was not conducted and should not be required.

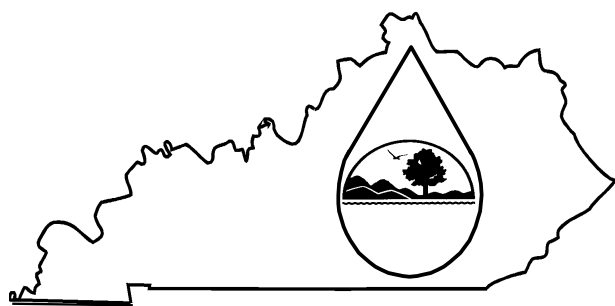
Following issuance of a KPDES Individual Permit, water monitoring and benthic macroinvertebrate sampling will be conducted in accordance with permit requirements.

If you have any questions, or require additional information, please call me at (606) 432-1447 ext. 311 or e-mail khaas@summit-engr.com.

Regards,

Kari Haas
Environmental Scientist

KPDES FORM 1



KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

PERMIT APPLICATION

This is an application to: (check one)

- ☒ Apply for a new permit.
☐ Apply for reissuance of expiring permit.
☐ Apply for a construction permit.
☐ Modify an existing permit.

Give reason for modification under Item II.A.

A complete application consists of this form and one of the following:

Form A, Form B, Form C, Form F, or Short Form C

For additional information contact:

KPDES Branch (502) 564-3410

I. FACILITY LOCATION AND CONTACT INFORMATION

AGENCY
USE

A. Name of business, municipality, company, etc. requesting permit
Sidney Coal Company, Inc

B. Facility Name and Location

Facility Location Name:
898-0835, Sandlick Surface Mine Number# 1

Facility Location Address (i.e. street, road, etc.):
Rockhouse Road and Middle Fork Rd after junction with KY 468.

Facility Location City, State, Zip Code:
Sidney, KY 41564

C. Facility Owner/Mailing Address

Owner Name:
Sidney Coal Company, Inc

Mailing Street:
P.O. Box 299

Mailing City, State, Zip Code:
Sidney, KY, 41564

Telephone Number:
606-353-5526

II. FACILITY DESCRIPTION

A. Provide a brief description of activities, products, etc:

Permit No. 898-0835- The removal of bituminous coal through contour/high wall mining of the Fireclay, Fireclay Rider, and the Taylor coal seams. Drainage control will be provided with 2 dugouts and 8 sediment cells.

B. Standard Industrial Classification (SIC) Code and Description

Principal SIC Code & Description:
1221 – Bituminous Coal & Lignite Mining-Surface

Other SIC Codes:

III. FACILITY LOCATION

A. Attach a U.S. Geological Survey 7 1/2 minute quadrangle map for the site. (See instructions)

B. County where facility is located:
Pike

City where facility is located (if applicable):
Sidney, KY 41564

C. Body of water receiving discharge:
Permit No. 898-0835- Sand Lick of Big Creek

D. Facility Site Latitude (degrees, minutes, seconds):
Permit No. 898-0835- 37° 38' 28" N

Facility Site Longitude (degrees, minutes, seconds):
Permit No. 898-0835- 82° 22' 05" E

E. Method used to obtain latitude & longitude(see instructions): 7.5' USGS Topographic Map

F. Facility Dun and Bradstreet Number (DUNS #) (if applicable):

IV. OWNER/OPERATOR INFORMATION**A. Type of Ownership:**

☐ Publicly Owned ☒ Privately Owned ☐ State Owned ☐ Both Public and Private Owned ☐ Federally owned

B. Operator Contact Information (See instructions)

Owner Name:

Sidney Coal Company, Inc

Telephone Number:

606-353-5526

Mailing Street:

P.O. Box 299

Mailing City, State, Zip Code:

Sidney, KY, 41564

Is the operator also the owner?

Yes ☒ No ☐

Is the operator certified? If yes, list certification class and number below.

Yes ☐ No ☒

Certification Class:

Certification Number:

V. EXISTING ENVIRONMENTAL PERMITS

Current KPDES Number:

Pending

Issue Date of Current Permit:

Pending

Expiration Date of Current Permit:

Number of Times Permit Reissued:

Date of Original Permit Issuance:

Sludge Disposal Permit Number:

Kentucky DOW Operational Permit #:

Kentucky DSMRE Permit Number(s):

898-0835

C. Which of the following additional environmental permit/registration categories will also apply to this facility?

CATEGORY	EXISTING PERMIT WITH NO.	PERMIT NEEDED WITH PLANNED APPLICATION DATE
Air Emission Source		
Solid or Special Waste		
Hazardous Waste - Registration or Permit		

VI. DISCHARGE MONITORING REPORTS (DMRs)

KPDES permit holders are required to submit DMRs to the Division of Water on a regular schedule (as defined by the KPDES permit). The information in this section serves to specifically identify the department, office or individual you designate as responsible for submitting DMR forms to the Division of Water.

A. Name of department, office or official submitting DMRs:

Larry Stanley

B. Address where DMR forms are to be sent. (Complete only if address is different from mailing address in Section I.)

DMR Mailing Name:

DMR Mailing Street:

DMR Mailing City, State, Zip Code:

DMR Official Telephone Number:

VII. APPLICATION FILING FEE

KPDES regulations require that a permit applicant pay an application filing fee equal to twenty percent of the permit base fee. Please examine the base and filing fees listed below and in the Form 1 instructions and enclose a check payable to "Kentucky State Treasurer" for the appropriate amount. Descriptions of the base fee amounts are given in the "General Instructions."

Facility Fee Category: Surface Mine Operation

Filing Fee Enclosed: \$660

VIII. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

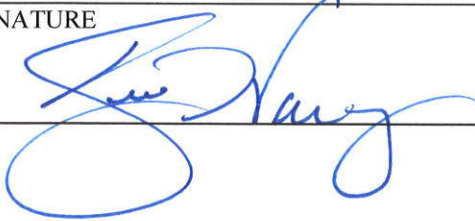
NAME AND OFFICIAL TITLE (type or print):

Kevin Varney - Vice President

TELEPHONE NUMBER (area code and number):

(606) 353-7201

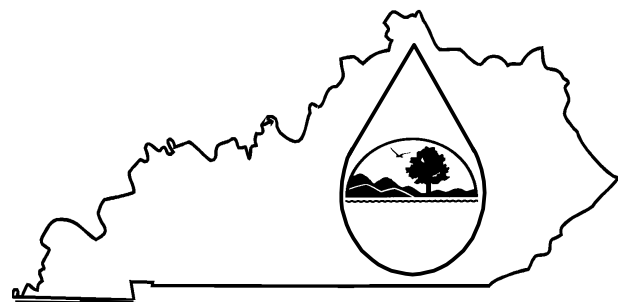
SIGNATURE



DATE:

May 5, 2010

KPDES FORM C



KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

PERMIT APPLICATION

A complete application consists of this form and Form 1.
 For additional information, contact KPDES Branch, (502) 564-3410.

Name of Facility: Sidney Coal Company, Inc.: Permit No. 898-0835				County: Pike			
I. OUTFALL LOCATION				AGENCY USE			

For each outfall list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

Outfall No. (list)	LATITUDE			LONGITUDE			RECEIVING WATER (name)
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds	
SC-1	37	38	43	82	22	11	Sand Lick of Big Creek
SC-2	37	38	35	82	22	14	Sand Lick of Big Creek
SC-3	37	38	28	82	22	18	Sand Lick of Big Creek
SC-4	37	38	28	82	22	13	Sand Lick of Big Creek
SC-5	37	38	34	82	22	05	Sand Lick of Big Creek
SC-6	37	38	41	82	22	00	Sand Lick of Big Creek
SC-7	37	38	46	82	21	54	Sand Lick of Big Creek
SC-8	37	38	52	82	21	54	Sand Lick of Big Creek
Dugout-1	37	38	27	82	22	10	Sand Lick of Big Creek
Dugout-2	37	38	29	82	22	06	Sand Lick of Big Creek

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

- Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfall. If a water balance cannot be determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.
- For each outfall, provide a description of: (1) all operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) the average flow contributed by each operation; and (3) the treatment received by the wastewater. Continue on additional sheets if necessary.

OUTFALL NO. (list)	OPERATION(S) CONTRIBUTING FLOW		TREATMENT	
	Operation (list)	Avg/Design Flow 10 Year (include units)	Description	List Codes from Table C-1
SC-1	Surface runoff	28.33 cfs (peak)	Sedimentation	1-U
			Discharge to surface water	4-A
SC-2	Surface runoff	28.92 cfs (peak)	Sedimentation	1-U
			Discharge to surface water	4-A
SC-3	Surface runoff	17.44 cfs (peak)	Sedimentation	1-U
			Discharge to surface water	4-A
SC-4	Surface runoff	48.22 cfs (peak)	Sedimentation	1-U
			Discharge to surface water	4-A
SC-5	Surface runoff	11.67 cfs (peak)	Sedimentation	1-U
			Discharge to surface water	4-A
SC-6	Surface runoff	31.40 cfs (peak)	Sedimentation	1-U
			Discharge to surface water	4-A
SC-7	Surface runoff	18.56 cfs (peak)	Sedimentation	1-U
			Discharge to surface water	4-A
SC-8	Surface runoff	10.50 cfs (peak)	Sedimentation	1-U
			Discharge to surface water	4-A
D-1	Surface runoff	37.19 cfs (peak)	Sedimentation	1-U
			Discharge to surface water	4-A
D-2	Surface runoff	44.02 cfs (peak)	Sedimentation	1-U
			Discharge to surface water	4-A

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES (Continued)

C. Except for storm water runoff, leaks, or spills, are any of the discharges described in Items II-A or B intermittent or seasonal?

☐

Yes (Complete the following table.)

☒

No (Go to Section III.)

OUTFALL NUMBER	OPERATIONS CONTRIBUTING FLOW	FREQUENCY		FLOW				
		Days Per Week	Months Per Year	Flow Rate (in mgd)		Total volume (specify with units)		Duration (in days)
				Long-Term Average	Maximum Daily	Long-Term Average	Maximum Daily	
(list)	(list)	(specify average)	(specify average)					

III. MAXIMUM PRODUCTION

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?

☐

Yes (Complete Item III-B) List effluent guideline category:

☒

No (Go to Section IV)

B. Are the limitations in the applicable effluent guideline expressed in terms of production (or other measures of operation)?

☐

Yes (Complete Item III-C)

☒

No (Go to Section IV)

- C. If you answered "Yes" to Item III-B, list the quantity which represents the actual measurement of your maximum level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

MAXIMUM QUANTITY			Affected Outfalls (list outfall numbers)
Quantity Per Day	Units of Measure	Operation, Product, Material, Etc. (specify)	

IV. IMPROVEMENTS

- A. Are you now required by any federal, state or local authority to meet any implementation schedule for the construction, upgrading, or operation of wastewater equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders and grant or loan conditions.

☐ Yes (Complete the following table) ☒ No (Go to Item IV-B)

IDENTIFICATION OF CONDITION AGREEMENT, ETC.	AFFECTED OUTFALLS		BRIEF DESCRIPTION OF PROJECT	FINAL COMPLIANCE DATE	
	No.	Source of Discharge		Required	Projected

- B. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs (or other environmental projects which may affect your discharges) you now have under way or which you plan. Indicate whether each program is now under way or planned, and indicate your actual or planned schedules for construction.

V. INTAKE AND EFFLUENT CHARACTERISTICS

- A, B, & C: See instructions before proceeding – Complete one set of tables for each outfall – Annotate the outfall number in the space provided.

NOTE: Tables V-A, V-B, and V-C are included on separate sheets numbered 5-18.

- D. Use the space below to list any of the pollutants (refer to SARA Title III, Section 313) listed in Table C-3 of the instructions, which you know or have reason to believe is discharged or may be discharged from any outfall. For every pollutant you list, briefly describe the reasons you believe it to be present and report any analytical data in your possession.

POLLUTANT	SOURCE	POLLUTANT	SOURCE
NONE			

VI. POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

- A. Is any pollutant listed in Item V-C a substance or a component of a substance which you use or produce, or expect to use or produce over the next 5 years as an immediate or final product or byproduct?

☐ Yes (List all such pollutants below) ☒ No (Go to Item VI-B)

B. Are your operations such that your raw materials, processes, or products can reasonably be expected to vary so that your discharge of pollutants may during the next 5 years exceed two times the maximum values reported in Item V?

☐ Yes (Complete Item VI-C) ☒ No (Go to Item VII)

C. If you answered "Yes" to Item VI-B, explain below and describe in detail to the best of your ability at this time the sources and expected levels of such pollutants which you anticipate will be discharged from each outfall over the next 5 years. Continue on additional sheets if you need more space.

VII. BIOLOGICAL TOXICITY TESTING DATA

Do you have any knowledge of or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☐ Yes (Identify the test(s) and describe their purposes below) ☒ No (Go to Section VIII)

VIII. CONTRACT ANALYSIS INFORMATION

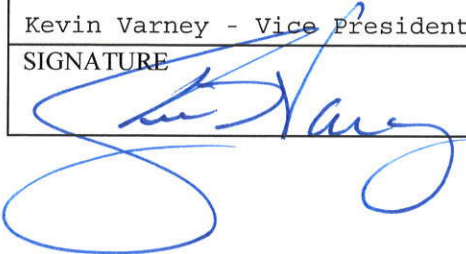
Were any of the analyses reported in Item V performed by a contract laboratory or consulting firm?

☐ Yes (list the name, address, and telephone number of, and pollutants analyzed by each such laboratory or firm below) ☒ No (Go to Section IX)

NAME	ADDRESS	TELEPHONE (Area code & number)	POLLUTANTS ANALYZED (list)

IX. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print): Kevin Varney - Vice President	TELEPHONE NUMBER (area code and number): (606) 353-7201
SIGNATURE 	DATE May 5, 2010

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets (use the same format) instead of completing these pages. (See instructions)

V. INTAKE AND EFFLUENT CHARACTERISTICS (Continued from page 3 of Form C)										OUTFALL NO.		
Part A – You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.												
1. POLLUTANT	2. EFFLUENT							3. UNITS (specify if blank)		4. INTAKE (optional)		
	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No of Analyses
	(1)	(2)	(1)	(2)	(1)	(2)				(1)	(2)	
	Concentration	Mass	Concentration	Mass	Concentration	Mass				Concentration	Mass	
a. Biochemical Oxygen Demand (BOD)	<p align="center">INFORMATION WILL BE PROVIDED IN ACCORDANCE WITH KPDES REQUIREMENTS FOLLOWING PERMIT ISSUANCE</p>											
b. Chemical Oxygen Demand (COD)												
c. Total Organic Carbon (TOC)												
d. Total Suspended Solids (TSS)												
e. Ammonia (as N)												
f. Flow (in units of MGD)												
g. Temperature (winter)												
h. Temperature (summer)												
i. pH												

Part B - In the MARK "X" column, place an "X" in the Believed Present column for each pollutant you know or have reason to believe is present. Place an "X" in the Believed Absent column for each pollutant you believe to be absent. If you mark the Believed Present column for any pollutant, you must provide the results of at least one analysis for that pollutant. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NO. (if available)	2. MARK "X"		3. EFFLUENT						4. UNITS		6. INTAKE (optional)			
	a.	b.	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
	Believed Present	Believed Absent	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
a. Bromide (24959-67-9)														
b. Bromine Total Residual														
c. Chloride														
d. Chlorine, Total Residual														
e. Color														
f. Fecal Coliform														
g. Fluoride (16984-48-8)														
h. Hardness (as CaCO ₃)														
i. Nitrate – Nitrite (as N)														
j. Nitrogen, Total Organic (as N)														
k. Oil and Grease														
l. Phosphorous (as P), Total 7723-14-0														
m. Radioactivity														
(1) Alpha, Total														
(2) Beta, Total														
(3) Radium Total														
(4) Radium, 226, Total														

**INFORMATION WILL BE PROVIDED IN ACCORDANCE WITH KPDES REQUIREMENTS
FOLLOWING PERMIT ISSUANCE**

Part B - Continued														
1. POLLUTANT And CAS NO. (if available)	2. MARK "X"		3. EFFLUENT						4. UNITS		5. INTAKE (optional)			
	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyses
			(1)	(2)	(1)	(2)	(1)	(2)				(1)	(2)	
			Concentration	Mass	Concentration	Mass	Concentration	Mass				Concentration	Mass	
n. Sulfate (as SO ₄) (14808-79-8)														
o. Sulfide (as S)														
p. Sulfite (as SO ₄) (14286-46-3)														
q. Surfactants														
r. Aluminum, Total (7429-90)														
s. Barium, Total (7440-39-3)														
t. Boron, Total (7440-42-8)														
u. Cobalt, Total (7440-48-4)														
v. Iron, Total (7439-89-6)														
w. Magnesium Total (7439-96-4)														
x. Molybdenum Total (7439-98-7)														
y. Manganese, Total (7439-96-6)														
z. Tin, Total (7440-31-5)														
aa. Titanium, Total (7440-32-6)														

**INFORMATION WILL BE PROVIDED IN ACCORDANCE WITH KPDES REQUIREMENTS
FOLLOWING PERMIT ISSUANCE**

Part C – If you are a primary industry and this outfall contains process wastewater, refer to Table C-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark “X” in the **Testing Required** column for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark this column (secondary industries, nonprocess wastewater outfalls, and non-required GC/MS fractions), mark “X” in the **Believed Present** column for each pollutant you know or have reason to believe is present. Mark “X” in the **Believed Absent** column for each pollutant you believe to be absent. If you mark either the **Testing Required** or **Believed Present** columns for any pollutant, you must provide the result of at least one analysis for that pollutant. Note that there are seven pages to this part; please review each carefully. Complete one table (all seven pages) for each outfall. See instructions for additional details and requirements.

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	

METALS, CYANIDE AND TOTAL PHENOLS

1M. Antimony
Total
(7440-36-0)

2M. Arsenic,
Total
(7440-38-2)

3M. Beryllium
Total
(7440-41-7)

4M. Cadmium
Total
(7440-43-9)

5M. Chromium
Total
(7440-43-9)

6M. Copper
Total
(7550-50-8)

7M. Lead
Total
(7439-92-1)

8M. Mercury
Total
(7439-97-6)

9M. Nickel,
Total
(7440-02-0)

10M. Selenium,
Total
(7782-49-2)

11M. Silver,
Total
(7440-28-0)

**INFORMATION WILL BE PROVIDED IN ACCORDANCE WITH KPDES REQUIREMENTS
FOLLOWING PERMIT ISSUANCE**

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	

METALS, CYANIDE AND TOTAL PHENOLS (Continued)

12M. Thallium, Total (7440-28-0)	INFORMATION WILL BE PROVIDED IN ACCORDANCE WITH KPDES REQUIREMENTS FOLLOWING PERMIT ISSUANCE														
13M. Zinc, Total (7440-66-6)															
14M. Cyanide, Total (57-12-5)															
15M. Phenols, Total															

DIOXIN

2,3,7,8 Tetra- chlorodibenzo, P, Dioxin (1784-01-6)	INFORMATION WILL BE PROVIDED IN ACCORDANCE WITH KPDES REQUIREMENTS FOLLOWING PERMIT ISSUANCE														
--	---	--	--	--	--	--	--	--	--	--	--	--	--	--	--

GC/MS FRACTION – VOLATILE COMPOUNDS

1V. Acrolein (107-02-8)	INFORMATION WILL BE PROVIDED IN ACCORDANCE WITH KPDES REQUIREMENTS FOLLOWING PERMIT ISSUANCE														
2V. Acrylonitrile (107-13-1)															
3V. Benzene (71-43-2)															
5V. Bromoform (75-25-2)															
6V. Carbon Tetrachloride (56-23-5)															
7V. Chloro- benzene (108-90-7)															
8V. Chlorodibro- momethane (124-48-1)															

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
9V. Chloroethane (74-00-3)	<div>INFORMATION WILL BE PROVIDED IN ACCORDANCE WITH KPDES REQUIREMENTS FOLLOWING PERMIT ISSUANCE</div>														
10V. 2-Chloro-ethylvinyl Ether (110-75-8)															
11V. Chloroform (67-66-3)															
12V. Dichloro-bromomethane (75-71-8)															
14V. 1,1-Dichloroethane (75-34-3)															
15V. 1,2-Dichloroethane (107-06-2)															
16V. 1,1-Dichlorethylene (75-35-4)															
17V. 1,2-Di-chloropropane (78-87-5)															
18V. 1,3-Dichloropro-pylene (452-75-6)															
19V. Ethyl-benzene (100-41-4)															
20V. Methyl Bromide (74-83-9)															

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT								4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyses	
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass		
21V. Methyl Chloride (74-87-3)	<div>INFORMATION WILL BE PROVIDED IN ACCORDANCE WITH KPDES REQUIREMENTS FOLLOWING PERMIT ISSUANCE</div>															
22V. Methylene Chloride (75-00-2)																
23V. 1,1,2,2- Tetrachloro- ethane (79-34-5)																
24V. Tetrachloro- ethylene (127-18-4)																
25V. Toluene (108-88-3)																
26V. 1,2-Trans- Dichloro- ethylene (156-60-5)																
27V. 1,1,1-Tri- chloroethane (71-55-6)																
28V. 1,1,2-Tri- chloroethane (79-00-5)																
29V. Trichloro- ethylene (79-01-6)																
30V. Vinyl Chloride (75-01-4)																

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT								4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses	
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass		
GC/MS FRACTION – ACID COMPOUNDS																
1A. 2-Chloro-phenol (95-57-8)	<div>INFORMATION WILL BE PROVIDED IN ACCORDANCE WITH KPDES REQUIREMENTS FOLLOWING PERMIT ISSUANCE</div>															
2A. 2,4-Dichlor-Orophenol (120-83-2)																
3A. 2,4-Dimeth-ylphenol (105-67-9)																
4A. 4,6-Dinitro-o-cresol (534-52-1)																
5A. 2,4-Dinitro-phenol (51-28-5)																
6A. 2-Nitro-phenol (88-75-5)																
7A. 4-Nitro-phenol (100-02-7)																
8A. P-chloro-m-cresol (59-50-7)																
9A. Pentachloro-phenol (87-88-5)																
10A. Phenol (108-05-2)																
11A. 2,4,6-Tri-chlorophenol (88-06-2)																
1B. Acena-phthene (83-32-9)																

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT								4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses	
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass		
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)																
2B. Acena- phtylene (208-96-8)	INFORMATION WILL BE PROVIDED IN ACCORDANCE WITH KPDES REQUIREMENTS FOLLOWING PERMIT ISSUANCE															
3B. Anthra- cene (120-12-7)																
4B. Benzidine (92-87-5)																
5B. Benzo(a)- anthracene (56-55-3)																
6B. Benzo(a)- pyrene (50-32-8)																
7B. 3,4-Benzo- fluoranthene (205-99-2)																
8B. Benzo(ghi) perylene (191-24-2)																
9B. Benzo(k)- fluoranthene (207-08-9)																
10B. Bis(2- chlor- oethoxy)- methane (111-91-1)																
11B. Bis (2-chlor- oisopropyl)- Ether																
12B. Bis (2-ethyl- hexyl)- phthalate (117-81-7)																

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT								4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses	
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass		
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)																
13B. 4-Bromo-phenyl Phenyl ether (101-55-3)	<div>INFORMATION WILL BE PROVIDED IN ACCORDANCE WITH KPDES REQUIREMENTS FOLLOWING PERMIT ISSUANCE</div>															
14B. Butyl-benzyl phthalate (85-68-7)																
15B. 2-Chloro-naphthalene (7005-72-3)																
16B. 4-Chloro-phenyl phenyl ether (7005-72-3)																
17B. Chrysene (218-01-9)																
18B. Dibenzo-(a,h) Anthracene (53-70-3)																
19B. 1,2-Dichloro-benzene (95-50-1)																
20B. 1,3-Dichloro-Benzene (541-73-1)																
21B. 1,4-Dichloro-benzene (106-46-7)																
22B. 3,3-Dichloro-benzidene (91-94-1)																
23B. Diethyl Phthalate (84-66-2)																

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT								4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyses	
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass		
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)																
24B. Dimethyl Phthalate (131-11-3)	INFORMATION WILL BE PROVIDED IN ACCORDANCE WITH KPDES REQUIREMENTS FOLLOWING PERMIT ISSUANCE															
25B. Di-N-butyl Phthalate (84-74-2)																
26B. 2,4-Dinitro-toluene (121-14-2)																
27B. 2,6-Dinitro-toluene (606-20-2)																
28B. Di-n-octyl Phthalate (117-84-0)																
29B. 1,2-diphenylhydrazine (as azonbenzene) (122-66-7)																
30B. Fluoranthene (208-44-0)																
31B. Fluorene (86-73-7)																
32B. Hexachloro-benzene (118-71-1)																
33B. Hexachloro-butadiene (87-68-3)																
34B. Hexachloro-cyclopenta-diene (77-47-4)																

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT								4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses	
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass		
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)																
35B. Hexachlo- roethane (67-72-1)	<div>INFORMATION WILL BE PROVIDED IN ACCORDANCE WITH KPDES REQUIREMENTS FOLLOWING PERMIT ISSUANCE</div>															
36B. Indneo- (1,2,3-oc)- Pyrene (193-39-5)																
37B. Isophorone (78-59-1)																
38B. Napthalene (91-20-3)																
39B. Nitro- benzene (98-95-3)																
40B. N-Nitroso- dimethyl- amine (62-75-9)																
41B. N-nitrosodi-n- propylamine (621-64-7)																
42B. N-nitro- sodiphenyl- amine (86-30-6)																
43B. Phenan- threne (85-01-8)																
44B. Pyrene (129-00-0)																
45B. 1,2,4 Tri- chloro- benzene (120-82-1)																

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyses
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	

GC/MS FRACTION – PESTICIDES

1P. Aldrin
(309-00-2)

2P. α -BHC
(319-84-6)

3P. β -BHC
(58-89-9)

4P.
gamma-BHC
(58-89-9)

5P. δ -BHC
(319-86-8)

6P. Chlordane
(57-74-9)

7P. 4,4'-DDT
(50-29-3)

8P. 4,4'-DDE
(72-55-9)

9P. 4,4'-DDD
(72-54-8)

10P. Dieldrin
(60-57-1)

11P. α -
Endosulfan
(115-29-7)

12P. β -
Endosulfan
(115-29-7)

13P. Endosulfan
Sulfate
(1031-07-8)

14P. Endrin
(72-20-8)

INFORMATION WILL BE PROVIDED IN ACCORDANCE WITH KPDES REQUIREMENTS
FOLLOWING PERMIT ISSUANCE

Part C – Continued

1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT								4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses	
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass		
GC/MS FRACTION – PESTICIDES																
15P. Endrin Aldehyde (7421-93-4)	INFORMATION WILL BE PROVIDED IN ACCORDANCE WITH KPDES REQUIREMENTS FOLLOWING PERMIT ISSUANCE															
16P Heptachlor (76-44-8)																
17P. Heptaclor Epoxide (1024-57-3)																
18P. PCB-1242 (53469-21-9)																
19P. PCB-1254 (11097-69-1)																
20P. PCB-1221 (11104-28-2)																
21P. PCB-1232 (11141-16-5)																
22P. PCB-1248 (12672-29-6)																
23P. PCB-1260 (11096-82-5)																
24P. PCB-1016 (12674-11-2)																
25P. Toxaphene (8001-35-2)																